

## Newsletter – September 2011

### Future of Rotherham LMC

Rotherham GPs will soon receive a letter from the LMC Chairman, Dr Cole, which seeks your thoughts on changing the way in which the LMC represents its constituents. An extract follows: -

*It has become evident that the position of the LMC in the local health community has changed over the last few years, and that if we are to remain an effective representative body of primary care we must also change. I and all members of Rotherham LMC have prided ourselves on being a small locally sensitive organisation that has been able to respond quickly and robustly to the needs of general practitioners. However with the advent of the CCG and the Reference Group, combined with the demands of PBC or its successor we realise that GP time is now at a premium*

*We propose a whole new approach to develop an LMC which can be more representative of general practice, become a sounding board for issues central to Rotherham and return a sense of accountability to the emerging arrangements for both commissioning and provision of health care*

*My letter is intended to give food for thought. Please discuss the contents with partners and colleagues and respond in any*

*way you see fit! I do read emails (unlike some!) and am always available to discuss issues over the 'phone. Remember that it's YOUR LMC*

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### Care Quality Commission (CQC) Registration

Following the recent consultation, the Department of Health has formally announced a delay to the registration of GP practices with the CQC until April 2013, subject to Parliamentary approval. The delay will now include NHS walk-in centres, contrary to what was originally proposed in the consultation, but as requested in the GPC's response. Whilst the announcement is welcome, the GPC's view is that the intervening period should be used to radically reduce the requirements for compliance on GP practices. **Practices should not undertake any significant preparatory work relating to registration at this stage and they should not engage others to do so for them as these third parties cannot possibly know what the final CQC process will include.** Further information about the announcement can be found in the Department of Health's press release here: <http://mediacentre.dh.gov.uk/2011/08/12/delay-to-cqc-registration-for-gp-practices/>

### CLAIM FOR FEES OR ALLOWANCES PAYABLE TO DOCTORS FOR SERVICES CARRIED OUT FOR LOCAL AUTHORITIES

The LMC wish to remind constituents that where the local authority engages them in collaborative fees e.g. for adoption medicals, mental health assessments, case conferences, blue badges and miscellaneous reports, that invoices should be sent to the PCT and not the local authority. This is because responsibility for payment by the PCT is enshrined in statute.

See NHS Act 2006 , Part 4 Para 77( 7)

*(7) The Secretary of State may arrange to make available to local authorities the services of persons.*

*(b) performing services under a general medical services contract, a general dental services contract or a general ophthalmic services contract*

*(c) providing services in accordance with section 89 arrangements or section 104 arrangements*

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### Firearm / Shotgun Licences

Following the last article in our newsletter we have been asked by practices to clarify the following with the BMA, and here is their reply: -

'with regard to situations where GPs have written to the police to raise concerns about the safety of an individual to hold a firearm then it would seem justifiable to retain this letter on the record, as it is medically relevant information about the patient.

Whenever information about a patient is disclosed to a third party our advice is that this should be recorded in the record. In circumstances where a doctor decides to disclose patient information without consent we advise that such disclosures should be documented in the record along with the reasons why this decision was made. A doctor may need to justify a disclosure made without consent and should be able to demonstrate that a clear and balanced approach was taken in order to make this decision'.

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## **NHS Reforms**

MPs debated the Health and Social Care Bill on 7<sup>th</sup> September. The Government had tabled over 1000 amendments covering issues relating to competition, duties of the Secretary of State and the NHS Commissioning Board, amongst others. All the government amendments were passed. The Bill will be debated in the Lords on 11 October, where it will have its Second Reading.

Despite achieving some amendments to the Bill, the BMA remains seriously concerned that the damaging aspects will undermine the potential benefits of more clinician involvement in commissioning. The BMA has been calling for the Bill to be withdrawn, or at the very least, significantly amended. The BMA has been lobbying MPs and Peers ahead of the parliamentary debates, including launching a lobbying toolkit to help members contact their local

MP prior to the debates in the House of Commons.

Concerns were also expressed that, contrary to the Secretary of State's original vision, the reforms were resulting in increasing central control and additional bureaucratic layers that would stifle the ability of clinical commissioning groups (CCGs) and the clinicians involved to exert their influence over the commissioning process.

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## **Seasonal flu vaccination programme for 2011/12**

The GPC has written to all GPs to remind them of the arrangements for the seasonal flu vaccine programme in 2011/12. Evidence shows that patients in at-risk groups are much more likely to die from seasonal flu than healthy individuals, and given that the seasonal flu vaccine uptake in the at-risk groups in patients under 65 and pregnant women was much lower last year than that recommended by the WHO, we would encourage practices to ensure that those in the at-risk groups are given priority. The GPC are also concerned about the low uptake in healthcare workers, so we would encourage practices to ensure that staff are better protected.

The letter is also available on the website:

[http://www.bma.org.uk/images/gpseasonalfulettersep2011\\_tcm41-208947.doc](http://www.bma.org.uk/images/gpseasonalfulettersep2011_tcm41-208947.doc)

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## **Attendance at Meetings**

Constituents are reminded that they are always welcome to attend meetings of the LMC as observers. The Committee meets on the second Monday of every month in the Board Room at Rotherham General Hospital

## **OFFICERS OF THE LMC**

**Chairman**  
**Dr Adrian Cole**  
**Tel: 0844 8151956**

**Vice Chairman**  
**Dr Chris Myers**  
**Tel: 0845 1240887**

**Medical Secretary**  
**Dr Neil Thorman**  
**Tel: 01909 770213**  
[Neil.thorman@gmail.com](mailto:Neil.thorman@gmail.com)

**NEXT**

**LMC MEETING**

**MONDAY**

**10th OCTOBER**

**COMMENCING**

**AT 7.30 PM**

**CONTACT US AT THE LMC  
OFFICE C/O: -**

**Greg Pacey**  
**Secretary & Treasurer**  
**Rotherham LMC**  
**99 Green Lane**  
**Wickersley**  
**Rotherham**  
**S66 2DD**

**Or e-mail: -**  
[rotherhamlmc@hotmail.com](mailto:rotherhamlmc@hotmail.com)  
**web - [www.rotherham.lmc.org](http://www.rotherham.lmc.org)**